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PTO/SB/01 (10-00)
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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☒ Declaration Submitted with Initial Filing OR ☐ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	D5110
First Named Inventor	Jason R. Thompson
COMPLETE IF KNOWN	
Application Number	
Filing Date	
Group Art Unit	
Examiner Name	

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

UNIVERSAL ASSESSORY-MOUNTING ASSEMBLY

(Title of the Invention)

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
			<input type="checkbox"/>	YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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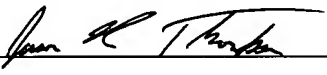

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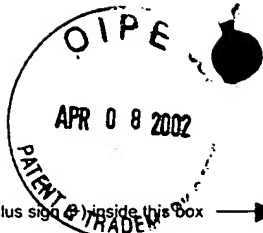
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DECLARATION — Utility or Design Patent Application

Direct all correspondence to: <input checked="" type="checkbox"/> Customer Number or Bar Code Label				OR <input type="checkbox"/> Correspondence address below	
Name		Jeffrey P. Calfa			
		30410 PATENT TRADEMARK OFFICE			
Address					
International Truck Intellectual Property Company, L.L.C.					
Address					
4201 Winfield Rd.					
City		Warrenville		State	IL
				ZIP	60555
Country	U.S.A.		Telephone	630/753-2241	
				Fax 630/753-3982	
<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.</p>					
NAME OF SOLE OR FIRST INVENTOR :			<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle (if any))		Jason R.		Family Name or Surname	
				Thompson	
Inventor's Signature				Date 11/2/01	
Residence: City		Fort Wayne		State	IN
				Country	USA
				Citizenship	United States
Mailing Address					
4810 Arlington Ave.					
Mailing Address					
City		Fort Wayne		State	IN
				ZIP	46807
				Country	U.S.A.
NAME OF SECOND INVENTOR:			<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle (if any))		Matthew R.		Family Name or Surname	
				LaFontaine	
Inventor's Signature				Date 11/20/01	
Residence: City		Fort Wayne		State	IN
				Country	USA
				Citizenship	United States
Mailing Address					
1249 Branning Ave.					
Mailing Address					
City		Fort Wayne		State	IN
				ZIP	46807
				Country	United States
<input checked="" type="checkbox"/> Additional inventors are being named on the <u>1</u> supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.					



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PTO/SB/02A (11-00)

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DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 1 of 1

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
William C.		Downs	
Inventor's Signature <i>William C. Downs</i>		Date <i>12/12/01</i>	
Residence: City	Fort Wayne	State	IN
Country	USA	Citizenship	USA
Mailing Address 175 Ln 200A Charles W			
Mailing Address			
City	Angola	State	IN
ZIP	46703	Country	USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	
Country		Citizenship	
Mailing Address			
Mailing Address			
City		State	
ZIP		Country	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	
Country		Citizenship	
Mailing Address			
Mailing Address			
City		State	
ZIP		Country	

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PTO/SB/81 (10-00)

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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	
Filing Date	
First Named Inventor	Jason R. Thompson
Group Art Unit	
Examiner Name	
Attorney Docket Number	D5110

I hereby appoint:

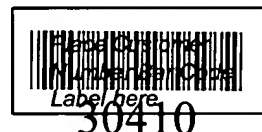
☒ Practitioners at Customer Number

30410

OR

☐ Practitioner(s) named below:

Name	Registration Number
Dennis Kelly Sullivan	26,510
Jeffrey P. Calfa	37,105
Neil Powell	45,202
Gilberto Hernandez	46,483



as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

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OR

☐ Firm or
Individual Name

International Truck Intellectual Property Company, L.L.C.

Address

P.O. Box 1488

Address

4201 Winfield Rd.

City

Warrenville

State

IL

Zip

60555

Country

U.S.A.

Telephone

630/753-3023

Fax

630/753-3982

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name

Jason R. Thompson

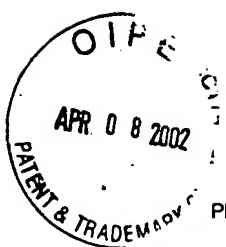
Signature

Date

11/02/01

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of 3 forms are submitted.



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Application Number	
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First Named Inventor	Jason R. Thompson
Group Art Unit	
Examiner Name	
Attorney Docket Number	D5110

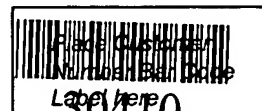
I hereby appoint:

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OR

☐ Practitioner(s) named below:



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<input type="checkbox"/> Firm or Individual Name	International Truck Intellectual Property Company, L.L.C.				
Address	P.O. Box 1488				
Address	4201 Winfield Rd.				
City	Warrenville	State	IL	Zip	60555
Country	U.S.A.				
Telephone	630/753-3023	Fax	630/753-3982		

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name	Matthew R. LaFontaine
Signature	<i>Matthew R. LaFontaine</i>
Date	11/21/01

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

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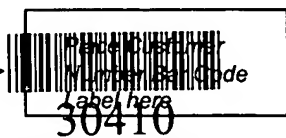
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	Examiner Name	
	Attorney Docket Number	D5110

I hereby appoint:

- ☒ Practitioners at Customer Number 30410
- ☐ Practitioner(s) named below:



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SIGNATURE of Applicant or Assignee of Record

Name	William C. Downs
Signature	
Date	12/12/01

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